

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER

Joseph D. Courtney

(Full Name)

202-225-2076

(Daytime Telephone)

2012 MAY 15 PM 3:47

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Filer Status

☒ Member of the U.S. House of Representatives

☐ Officer Or Employee

Employing Office:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$50 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
St. Francis Hospital and Medical Center	Spouse Salary	N/A
Windam Hospital	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source	Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving account; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.</p> <p>If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.</p>	<p>At close of reporting year.</p> <p>If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchase (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
401(a) Plan-Invesco Van Kampen Equity and Income	\$1,001 - \$15,000	Tax deferred	NONE	
403(b) American Century Mid Cap Value Inst	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) Guaranteed Income Fund	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) Hartford Dividend and Growth Y	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) ING Mid Cap Opportunities I	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) ING T Rowe Price Growth Equity Portfolio (fm)	\$1,001 - \$15,000	Tax deferred	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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403(b) Lincoln Multi-Fund Variable Annuity Fixed Account	\$1,001 - \$15,000	Tax deferred	NONE	
403(b) Mainstay Large Cap Growth I	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) MFS New Discovery R4	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) Oakmark International I	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) Oppenheimer International Growth Y	\$1,001 - \$15,000	Tax deferred	NONE	P
403(b) PIMCO Total Return Institutional Fund	\$15,001 - \$50,000	Tax deferred	NONE	P
403(b) William Blair Small Cap Value I	\$1,001 - \$15,000	Tax deferred	NONE	P
Commonwealth Annuity and Life "Exceptional Life Policy"	\$1,001 - \$15,000	None	NONE	
Def. Cont. Plan-American Balanced Fund	\$1,001 - \$15,000	Tax deferred	NONE	
Def. Cont. Plan-MetLife Stable Value Fund	\$1,001 - \$15,000	Tax deferred	NONE	
Def. Cont. Plan-Russell LifePoint Growth Strategy	\$1,001 - \$15,000	Tax deferred	NONE	
Def. Cont. Plan-Washington Mutual Investors Fund	\$1,001 - \$15,000	Tax deferred	NONE	
IRA-American Blackrock Focus Growth (MCFIX)	\$1,001 - \$15,000	Tax deferred	NONE	
IRA-American Growth Fund of America (GFACX)	\$15,001 - \$50,000	Tax deferred	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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IRA-American Small Cap World (SMCWX)	\$15,001 - \$50,000	Tax deferred	NONE	
IRA-Blackrock Large Cap (MCLR)	\$15,001 - \$50,000	Tax deferred	NONE	
IRA-Invesco Global Core (AWSCX)(ft)	\$15,001 - \$50,000	Tax deferred	NONE	
IRA-J Hancock Financial Inds (FIDAX)	\$1,001 - \$15,000	Tax deferred	NONE	
IRA-Lord Abbett Classic Large Stock CI C (LLRCX)	\$15,001 - \$50,000	Tax deferred	NONE	
IRA-Lord Abbett Small Cap Blend (LSBCX)	\$1,001 - \$15,000	Tax deferred	NONE	
IRA-Merrill Cash/Money Accounts	\$15,001 - \$50,000	Tax deferred	NONE	
IRA-Putnam International New Growth CI C (PIOCX)	\$1,001 - \$15,000	Tax deferred	NONE	
Met Life Variable Annuity-Janus Forty Portfolio	None	Tax deferred	NONE	S
Met Life Variable Annuity-MetLife Stock Index Portfolio	None	Tax deferred	NONE	S
Met Life Variable Annuity-Oppenheimer Global Equity Portfolio	None	Tax deferred	NONE	S
Templeton World Fund Class A (ft)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	403(b) American Century Mid Cap Value Inst	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) Guaranteed Income Fund	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) Hartford Dividend and Growth Y	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) ING Mid Cap Opportunities I	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) Mainstay Large Cap Growth I	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) MFS New Discovery R4	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) Oakmark International I	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) Oppenheimer International Growth Y	P	N/A	11-1-11	\$1,001 - \$15,000
	403(b) PIMCO Total Return Institutional Fund	P	N/A	11-1-11	\$15,001 - \$50,000
	403(b) William Blair Small Cap Value I	P	N/A	11-1-11	\$1,001 - \$15,000
	Met Life Variable Annuity-Janus Forty Portfolio	S	N/A	10-26-11	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Met Life Variable Annuity-Metlife Stock Index Portfolio	S	N/A	10-26-11	\$1,001 - \$15,000
	Met Life Variable Annuity-Oppeheimer Global Equity Portfolio	S	N/A	10-26-11	\$15,001 - \$50,000

SCHEDULE V - LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report mortgages on personal residences.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Chase Bank	July 2011	Mortgage on personal residence (not rented)	\$50,001 - \$100,000
	Chase Bank	July 2003	Mortgage on personal residence (zero balance, refinanced for loan above)	\$50,001 - \$100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Connecticut District Export Council	Apr. 16-20	Boston MA-London, UK- Boston MA	Y	Y	N	None

SCHEDULE VIII - POSITIONS

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member (uncompensated)	Connecticut Health Policy Project

FOOTNOTES

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Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Value did not exceed reporting threshold in 2010.	Def. Cont. Plan-MetLife Stable Value Fund
2	Schedule III	Value did not exceed reporting threshold in 2010.	403(b)-ING T Rowe Price Growth Equity Portfolio
3	Schedule III	Previously disclosed Invesco Van Kampen Global Franchise (VGFCX) acquired by Invesco Global Core fund as of May 23, 2011.	IRA-Invesco Global Core (AWSCX)(fm)
4	Schedule III	529 plans disclosed on 2010 report did not exceed the reporting threshold as of December 31, 2011.	2010 Franklin Templeton 529 Plan entries.
5	Schedule III	UTMA account for benefit of dependent child. Inadvertently omitted from prior reports.	Templeton World Fund Class A (fm)
6	Schedule IV	11-1-11 date is approximate, as exact date does not appear on statements. Transactions were made during 4th qtr. following transfer of proceeds resulting from 10-26-11 MetLife sales.	403(b) purchases